U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number J - 25/9 7	2. Fiscal Year Covered From  1
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name William L Glover	Name Communication Workers of America  Labor Organization File Number 000/88
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any PO Box 1615
Street 14 Crescent Drive	Street 922 East Saint Patrick
City Deadwood	City Rapid City
State South Dakota ZIP lode + 4 57732-1527	State South Dakota ZIP Code + 4 57709-1615
5. Position in labor organization. President	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests {except os specified in the exclusions set forth in the instructions};

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose erriployees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest Transaction, or Income.		
Name Qwest Communications	1/26/05 trip to Minneapolis for Labor/Management meeting lodging and air transportation		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	7.b. Amount		
Street 1801 California Street			
City Denve:	\$700		
State Colorado ZIP Coce + 4 80202			

## Signature

16. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed	William	4	May	
	<u> </u>		· · · · · · · · · · · · · · · · · · ·	

On	3/24/06
	Date

605	641	4001
	Teleph	none Number

Name of Person Filing William Glover		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trus, in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any)	9. Business deals with		
Name Trade Name, if any:	a. Labor Organiz i	tion	
P.O. Box, Bldg., Room No., if any	b. Trust		
Street	c. Employer		
City State ZIP Code + 4			
10. If 9.b. or 9.c is checked give trust or employer's name	11.a. Nature of such dea	ing	
Name	- - -		
Trade Name, if any:			
P.O. Box, Bldg. Room No , if any  Street		<u> </u>	
City	11.b. Approximate dollar value 12.a. Nature of interest hel		
State ZIP Code + 4			
	12.b Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	. 14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg. Room No., if any			
Street			
City			
State ZIP Code + 4	1		

14.b Amount of payment

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or Consultant

13.b. Is the Business an Employer

Name of Person Filing William Glover	File Number <b>U</b> -
	 L

## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derivemployees your organization represents or is actively seeking to represent	red income or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Qwest Communications	2/8/05 - 2/9/05 trip to Denver for Presidents meeting, lodging, meals, air transcortation
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
	7.b. Amount.
Street 1801 California Street	
City Denver	\$772
State Colcrado ZIP Code + 4 80202	

6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Qwest Communications	4/5/05 - 4/6/05 trip to Minneapolin for Labor/Management meeting lodging, air traisportation
Trade Name, f any	
P.O. Box, Bldg., Room No., if any	
	7.b Amount
Street 1801 California Street	
City Denver	\$700
State Colorado ZIF Code + 4 80202	

Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Trair saction, or Income.
Name Qwest Communications	7/11/05 - 7/12/05 trip to Minneapol.s for Labor/Management meeting lodging, air transportation
Trade Name, flany:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 1801 California Street	
City Denver	\$700
- 40000	
State Colorado ZIF Code + 4 80202	

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Add New Part A

Name of Person Filing William Glover	File Number U-		
Part A Continuation Page			
A. Held an interest in, engaged in transactions (including loans) with, or derived it employees your organization represents or is actively seeking to represent.	ncome or other economic ber sht of monetary value from an employer whose		
6. Name and address of Employer (including trade name if any)	7.a. Nature of Interest, Transaction, or Income.		
Name Qwest Communications	trip to Minneapolis for Labor/Management meeting lodging, air transportation		
Trade Name, if any:			
P.O. Box, Bldg., Room No , if any	7 b. Amount.		
Street 1803 California Street	T.V. AHOVIIL		
City Denver	\$700		
State Colorado ZIP Code + 4 80202			
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6. Name and address of Employer (including trade name if any)	7.a. Nature of Interest, Trar saction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	7.b Amount.		
Street			
City			
State ZIP Code + 4			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6 Name and address of Employer (including trade name if any).	7.a Nature of Interest, Transaction, or Income.		
Name			
Trade Name, 'f any:			
P.O. Box, Bldg., Room No., if any	7.b. Amount		
Street			
City			

Add New Part A

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Z<sup>i</sup>F<sup>i</sup> Code + 4

State

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